

CASE
OF
EPILEPSY,
ATTENDED WITH
REMARKABLE SLOWNESS OF THE PULSE.
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COMMUNICATED BY
DR. JAMES JOHNSON.

Read April 13th, 1824.

AN officer of the navy, aged about forty-six, who had served much at sea in different climates, experienced about sixteen years ago, a single attack of epilepsy, from which time, till about four years preceding the present period, there was no recurrence of the disease; he then, however, had another attack while in bed, and, in consequence, fell out on the floor. From this time till August, 1820, he enjoyed good health, but, on the 23d of that month, I was requested to visit him, and though on this occasion I had no opportunity of

seeing him during any of the paroxysms, I had every reason to conclude, from the symptoms mentioned, that the disease under which he laboured was epilepsy, which, by moderate blood-letting, both local and general, purgatives, and light tonics, together with small doses of the pil. hydrargyri, I soon succeeded in checking. He remained quite free from complaint till the end of January, 1821, and appeared to have regained his usual health. Indeed on the day preceding his attack on this occasion, I met him while on my road to visit a patient in the country, driving his chaise, and looking remarkably well.

On the 27th of January, I was again requested to visit this patient, and found him labouring under all his former symptoms, having suffered many paroxysms. Indeed, they were now so frequent that, in the space of half an hour, while I was with him, he had four or five attacks. During the paroxysms he exhibited all the usual symptoms of epilepsy; yet these were of very short duration, sometimes lasting only a few minutes, and never being followed by a disposition to sleep. They were commonly preceded by nausea, and a sensation as if something arose in the stomach, and proceeded upwards to the head. Occasionally the nausea proved very troublesome, and was accompanied by vomiting even when the fits did not come on. The same plan of cure was pursued as on the former occasion, with the addition of the tinct.

valerianæ ammoniata. A seton was inserted in the nape of the neck ; great attention was paid to the regulation of his diet and the state of his bowels, and the disease soon ceased.

About the latter end of April or beginning of May, I was again called upon to visit him, and found the paroxysms had been slighter, and not so frequent, but he complained of great uneasiness and distention about the epigastrium, which some purgatives he had previously taken had failed to remove. He also complained of dyspnœa, which frequently made it necessary for him to sit up in bed ; and, on examining his pulse, I found it to beat only thirty-six in the minute, but it was regular and small. On the following morning the pulse was only beating twenty in the minute, but, in the evening, it got up to 32, and from this time till the 6th of May, it varied from 28 to 56, but was generally under the latter number, though without any return of the paroxysm.

For this attack he took purgatives ; and a blister was applied to the epigastrium. I likewise prescribed light tonics combined with preparations of humulus and carbonate of ammonia. A few ounces of blood were taken from between the shoulders. He took also the oxyd of zinc with extr. anthe-midis, under the use of which remedies the paroxysms ceased, and he regained a fair portion of health.

Soon after this I advised his proceeding to London, to take the advice of one of the physicians of the metropolis, which he accordingly did; and I was not called upon to visit him professionally till the 2d of July, up to which period he had followed the prescriptions and directions he received in town, without any apparent advantage.

July 2. I found that he had been attacked three or four times this day in the usual manner. He complained of great languor, uneasiness, and fulness about the epigastrium, which a purge had not relieved; and, on examining the right side carefully, about the region of the liver, there was a tenderness and evident fulness towards the scrobiculus cordis. The pulse was 56 in the minute, and the spirits depressed. He took a moderate dose of castor oil with a small portion of spt. terebinth.; and eight ounces of blood were removed from the hepatic region by the cupping-glasses.

On the 3d I found he had passed a very bad night, and had been troubled with frequent nausea, vomiting, and slight attacks of the paroxysms. The countenance was very sallow, tongue white, pulse 24 in the minute, no uneasiness in the head, urine high coloured, and he still complained of tenderness about the hepatic region. He was directed to rub in half a drachm of camphorated mercurial ointment at bed-time, and to take a pill consisting of pil. hydrarg. with ext. colocynth. and

pulv. rhei; likewise, ten drachms of the decoction of taraxacum, with a proportion of aromatic tincture, twice a-day.

9th. The patient has had several slight attacks, but is again more comfortable. The attacks have generally occurred after dinner. Pulse 52, and firmer; no specific effect from the mercury. Two drachms of Epsom salts were directed to be taken occasionally, in addition to his former medicines.

16th. Has had many slight attacks since I saw him, and he complains much of fulness and uneasiness about the epigastrium; appetite not so good; he looks thinner; pulse only 20 in the minute. He was ordered infusion of cascarilla, with tincture of cardamons and sulphuric æther, three times a-day.

17th. I this day visited him in consultation with my friend Dr. Sanden. The pulse was only beating at the rate of 18 in the minute. The stools contained an abundance of bile, and he thought he felt a slight effect from the mercurial medicines in his mouth, but nothing of the kind appeared on examination. The mercurial medicines were omitted, the draughts continued, and he was ordered an aperient pill twice a-day.

20th. He passed yesterday in a very comfortable manner, and slept quietly during the first part

of the night. Towards morning, however, the paroxysms came on stronger than usual. I found his spirits much depressed, and the pulse, at 2 p.m. only 14 in the minute. I was informed, however, that it had varied from 48 to 54 last night. The patient has had several scanty stools, but he complains of considerable uneasiness in the tract of the colon, with slight tenesmus; tongue a little white; has frequent nausea, for which he has taken a saline draught.

A blister was applied to the region of the liver. He was ordered a draught with sulphate of magnesia, and afterwards to continue the decoction of taraxacum. An anodyne draught (composed of tinct. opii and tinct. hyoscyami in mint water) was prescribed for him at bed-time.

21st. During the first part of the night the patient slept well, after which he had great uneasiness in the stomach, followed by vomiting and also some slight paroxysms; pulse 14 in the minute; says he has a sensation of weight in the head with drowsiness; urine is higher coloured than usual. The anodyne draught was directed to be omitted; pills and draught continued as before.

22d. Has passed a wretched night, and this morning I found the paroxysms more frequent and severe than I had yet seen them. During the paroxysm the pulse is altogether suspended, the

face becomes pale and convulsed, a transient flash then succeeds, the pulse is again felt, and he regains his recollection to be again attacked. The oppression about the præcordia is not very great to-day, the pulse beats at the rate of 74 in the minute, for perhaps the space of a minute, then intermits for 7, 8, or 10 seconds. He has vomited a yellow glairy fluid.

In the evening I found he had been many times attacked during the day, but was then better; he complained however of more pain about the præcordia, and his pulse beat only 20 in the minute. The pills were ordered to be continued, and an effervescing draught to be taken occasionally; he was also ordered to take a draught containing the muriated tincture of iron, four times a-day.

24th. His sleep has been disturbed, and he has experienced several slight attacks; he complains much of oppression about the præcordia; pulse varies from 16 to 18 in the minute. An anodyne at night was added to the former medicines.

25th. Passed the first part of the night very quietly. The attacks are now more like spasmodic twitchings than epilepsy, but they are very frequent, and the pulse is often suspended for ten or twelve seconds. The medicines were ordered to be continued; and a draught, composed of the black drop, ammoniated tincture of assafoetida,

tincture of cardamoms, and peppermint water, to be given at bed-time, in the room of the former anodyne.

August 2d. No return of the paroxysms since the last visit. Twitchings continue, but he looks much more cheerful. Strength returning, and appetite improved; sleeps fairly; pulse 24; tongue clean. Anodyne draught omitted, and the tonic continued twice a-day.

4th. Remains much in the same state with respect to the twitchings, but the other symptoms are improved.

The patient removed from the neighbourhood on the following day; and I learn that the unusual slowness of pulse has continued, with occasional attacks of epilepsy, and that he has since been affected with anasarcaous swellings in different parts of his body.

The foregoing case exhibits a train of symptoms which I have never before met with in epilepsy; and the only instances I am acquainted with which in any degree resemble that which is here detailed, are related by the celebrated Morgagni.

The first he mentions is recorded in Book I. Let-
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ter ix. Article 7., in which he gives the case of a "worthy priest, of a moderately fat habit, and florid complexion, who in his sixty-eighth year was attacked by epilepsy, which left behind it the greatest slowness of pulse, and, in like manner, a coldness of the body." The latter however was soon overcome, though the disease often returned, but the slowness of the pulse still remained. The first attack of epilepsy was succeeded by a pain in the right hypochondrium, which was resolved by bilious dejections; the other paroxysms, which were slighter, generally succeeded to a sensation of something like smoke arising in the hypochondria and ascending to the head. A sense of fulness about the hypochondria was troublesome to the patient, and increased by the ingesta, especially fluids. As the disease advanced, he was subject to sudden attacks of dyspnoea, which, as in the case I have related, compelled him to sit up in bed. Morgagni does not mention the minimum of the pulse in this instance, but from a quotation he has introduced from Gerbezius, I should conceive it was not below 24 in the minute.

The other case mentioned by Morgagni is in the Letter lxiv. Article 5., which exhibited an equal slowness of pulse, and was considered to have arisen from the same cause, viz. disorder of the chylopoietic viscera. This case terminated fatally, and, on examination, many pints of water

were found in the thorax ; adhesions of the lungs to the pleura costalis, and a collection of puriform fluid in the superior lobe of the left side. The spleen was larger than usual, and several of the other viscera shewed slight marks of disease.

The case of this gentleman was one in which, on several accounts, I felt greatly interested ; and it is but right to add, that I considered the disease to have arisen from the same cause as Morgagni assigns in these cases, before I consulted his invaluable works. Whether I was justified in doing so, is at present a matter of opinion. I may mention, however, that I have lately had occasion to treat a young lady, who had been long and painfully subject to the most severe attacks of this disease ; and by pursuing a plan of treatment calculated to improve the digestive functions, she has been now for nearly two years in the enjoyment of the best health : nor is this a solitary instance.

Welbeck Street, April 6th, 1824.